



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Annual Report**

Filing Period: June 1 - June 30

*In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2021

**1. Corporate ID No.** 001715750

**2. Name of Corporation** Lucy Rozen Compassion Center

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

**4. Principal Office Address**

No. and Street: 222 JEFFERSON BOULEVARD

SUITE 200

City or Town: WARWICK

State: RI Zip: 02888 Country: USA

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

TO OBTAIN A LICENSE FOR, AND TO OPERATE, A COMPASSION CENTER PURSUANT TO AND IN COMPLIANCE WITH SECTION 21-28.6 ET SEQ. OF THE GENERAL LAWS OF RHODE ISLAND, TO ENGAGE IN ANY LAWFUL ACTIVITY FOR WHICH A NON-PROFIT CORPORATION MAY BE ORGANIZED UNDER CHAPTER 7-6 OF THE GENERAL LAWS OF RHODE ISLAND, AND TO DO ANY AND ALL THINGS NECESSARY, SUITABLE OR PROPER FOR THE ATTAINMENT OF ANY AND ALL OF THE FOREGOING PURPOSES.

**6. Names and Addresses of the Officers and Directors:**

**All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
INCORPORATOR	ELLIOT YOUN-WOO CHOI	2 SEAPORT LANE, 11TH FLOOR BOSTON, MA 02210 USA
DIRECTOR	DAVID VINCENT ROZEN	187 SHADOW BROOK DRIVE WARWICK, RI 02886 USA
DIRECTOR	DAVID JOSEPH MEDEIROS	56 DEERFIELD COURT NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	DAVID ANTHONY PONTARELLI	130 MADISON AVENUE CRANSTON, RI 02920 USA

**7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

PARACORP INCORPORATED 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

**8. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 1 Day of October, 2021 at 5:55:36 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By RYAN JOHNSON  
Signature of Authorized Person

Form No. 631  
Revised 09/07

© 2007 - 2021 State of Rhode Island  
All Rights Reserved